## **REANIM - Aquitaine Registry on Myocardial Infarction**

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## Identification

Detailed name Aquitaine Registry on Myocardial Infarction

Sign or acronym REANIM

CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) CNIL: DR-2011-437 (27/10/2011)

## **General Aspects**

authorisation

Medical area Cardiology

Emergency medicine

Study in connection with Covid-

19

No

Health determinants Geography

Healthcare system and access to health care

services

Lifestyle and behavior

Medicine

Keywords STEMI; emergency; medical regulation;

complications; morbidity; treatment; mortality

## Scientific investigator(s)

(Contact)

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Name of the director Lesaine Surname **Emilie** Phone (+33) 5 57 57 92 49 **Email** emilie.lesaine@u-bordeaux.fr Organization **ISPED** Name of the director Saillour-Glenisson Surname Florence **Fmail** florence.saillour@chu-bordeaux.fr Organization University Hospital Collaborations Participation in projects, Yes networks and consortia **Details** Cassiopée Platform, INSERM Team U897 EMOS, Methodological Health Evaluation Unit (UMES). Current projects: analysis of re-admission to hospital following interventional cardiology procedure; relevance of angioplasty procedures in stable coronary patients. **Funding** Funding status **Public Details** Aquitaine ARS (Regional Health Agency) Governance of the database Sponsor(s) or organisation(s) CHU de Bordeaux responsible Organisation status **Public** ISPED (Institut de santé publique, d'épidémiologie et Sponsor(s) or organisation(s) responsible de développement) Organisation status **Public** Presence of scientific or Yes steering committees

Additional contact

Main features				
Type of database				
Type of database	Morbidity registers			
Database recruitment is carried out by an intermediary	A selection of health institutions and services			
Database recruitment is carried out as part of an interventional study	No			
Additional information regarding sample selection.	Comprehensive registry of activities.			
Database objective				
Main objective	To identify patients treated for STEMI within all Emergency Medical Aid Services (SAMU), Mobile Emergency and Resuscitation Services (SMUR) and Emergency Services in Aquitaine; To describe the priorities, time frames, approach and strategies of initial patient treatment; To describe the patient population treated for STEMI in sociodemographic and clinical terms; To ensure patient follow-up over one year in terms of cardiovascular morbidity and mortality, onset of complications and readmission to hospital.			
Inclusion criteria	Acute coronary syndrome with ST-segment elevation or new onset of LBBB; Development of symptoms over less than 24 hours; Exclusion of CRA patients prior to completion of ECG.			
Population type				
Age	Adulthood (19 to 24 years) Adulthood (25 to 44 years) Adulthood (45 to 64 years) Elderly (65 to 79 years) Great age (80 years and more)			
Population covered	Sick population			
Pathology	I21 - Acute myocardial infarction			
Gender	Male			

Woman

Geography area	Regional
French regions covered by the database	Aquitaine Limousin Poitou-Charentes
Detail of the geography area	Aquitaine
Data collection	
Dates	
Date of first collection (YYYY or MM/YYYY)	01/2012
Date of last collection (YYYY or MM/YYYY)	2015
Size of the database	
Size of the database (number of individuals)	[10 000-20 000[ individuals
Details of the number of individuals	1,500-2,000 STEMI each year
Data	
Database activity	Current data collection
Type of data collected	Clinical data Paraclinical data Biological data Administrative data
Clinical data (detail)	Direct physical measures
Paraclinical data (detail)	ECG
Biological data (detail)	Blood glucose
Administrative data (detail)	Patient identification; cardio- and neurovascular factors and history; treatment practice among emergency physicians during STEMI; complications that occurred during stay; cardio- and neurovascular morbidity and mortality; readmission to hospital.
Presence of a biobank	No
Health parameters studied	Health event/morbidity Health event/mortality Health care consumption and services

Care consumption (detail)		Hospitalization Medicines consumption
Pro	ocedures	
Quality procedure(s) used		Data extraction check; completeness check; quality check; consistency check
Pa	rticipant monitoring	Yes
Мс	onitoring procedures	Monitoring by crossing with a medical- administrative database Monitoring by crossing with a morbidity register
	etails on monitoring of orticipants	Linked to ACIRA registry on interventional cardiology and patient monitoring over one year.
Lin	nks to administrative sources	Yes
Linked administrative sources (detail)		rehospitalization, mortality
Pro	omotion and access	
Pro	omotion	
Ac	cess	
De	edicated website	https://www.registres-cnv.fr/
	esence of document that lists riables and coding procedures	Yes

for the registry.

Access on specific project only

Access on specific project only

Terms of data access (charter

for data provision, format of

Access to aggregated data

Access to individual data

data, availability delay)

By request to the technical and scientific committee